

# Aging Division

## Wyoming Department of Health

### Information and Education Bulletin

#### **Subject: Fraud**

The State of Wyoming is dedicated to detecting, investigating and deterring fraud. The Aging Division staff works with the Wyoming Attorney General, state and federal law enforcement, and other regulatory agencies, to detect and prosecute individuals and businesses involved in fraudulent activity related to government (both state and federal) funding and government funded activities. Investigations can lead to criminal prosecution and often lead to recovery of funding and appropriate fines and sanctions. The Aging Division is continually asked about fraud, what it is, how it is committed, the impact, etc. This Education and Information Bulletin is meant to answer some common questions about fraud.

#### **What is Fraud?**

Fraud is defined to be an intentional deception or a false misrepresentation of a matter of fact which induces another person, party or entity to part with some valuable thing (usually a monetary loss) or to surrender a legal right. Fraud is usually committed with the perpetrator knowing that the fraudulent act could result in some unauthorized benefit to himself or some other person, entity or organization. It includes any act that constitutes fraud under applicable Federal or State Law.

#### **Impact of Fraud:**

Fraud impacts all of us, especially where taxpayer dollars are concerned. The costs associated with investigation, recoupment and prosecution negatively impact funders, contractors, and ultimately, the clients that we serve. When one organization commits a fraudulent act, other organizations may receive decreased funding as the result of this act. Fraud put funding in jeopardy and may negatively impact all of the citizens of our great state.

#### **Question and Answers?**

- Is fraud a crime? Answer – Yes.
- I am aware of a situation where both the Aging Division Title III and Medicaid were intentionally billed (through standard reporting) for the same services, delivered at the same time, to the same client. Is this fraud? Answer – Yes.
- I am aware of a situation where the Aging Division (through standard reporting) was intentionally billed for services to a client that were not provided. Is this fraud? Answer – Yes.
- I accidentally added a CBIHS respite client to a Caregiver report for payment. Is this fraud? Answer – No. (The act was not intentional.)
- I am aware of a situation where persons were intentionally added to a daily meal sign in sheet who were not actually served a congregate meal in a facility and that meal was submitted to the

Aging Division for reimbursement or payment. Is this fraud? Answer – Yes. (If someone else is also signing in for that client, it may also be an act of forgery.)

- What kinds of penalties are there for fraud? Answer – Penalties vary but they can include recoupment of funds, fines, penalties, sanctions, assessments, criminal prosecution and debarment from receipt of federal or state funding. “...in a case of false or fraudulent claims, the OIG may seek a penalty of up to \$10,000 for each item or service improperly claimed, and an assessment of up to three times the amount improperly claimed. 42 U.S.C. § 1320a-7a(a).”
- I am aware of a situation where Aging Division funding that was provided for a specific purpose was intentionally used, without written permission, for another purpose. Is this fraud? Answer – Yes.
- I am aware of a situation where services were provided by a contractor who was not authorized or licensed to do so, and then those services were billed (through standard reporting) to the Aging Division for payment. Is this fraud? Answer – Yes.
- I am aware of a situation where the Aging Division was billed (through standard reporting) for unauthorized activities. Is this fraud? Answer – Yes.
- I am aware of a situation where financial records were intentionally misrepresented for the purposes of obtaining funding or payment through the Aging Division. Is this fraud? Answer – Yes.
- Can you provide me with some examples of fraud? Answer - Some examples of fraud include:
  - Falsification of expenses and invoices
  - Theft of cash, fixed assets or resources
  - Improper use of funding
  - Misuse of resources
  - Alteration or falsification of records
  - Failure to account for monies collected
  - Utilization of funds for prohibited activities
  - Billing for unauthorized services
  - Knowingly providing false information on applications and requests for funding
  - Obtaining money or property by means of false pretenses, representations or promises
  - Intentional misrepresentation

### **Reporting Fraud to the Aging Division:**

All Aging Division contractors have a duty, responsibility and obligation to assist in combating fraud, waste and abuse in all Aging Division programs. As such, it is imperative that contractors, boards of directors and all staff members report matters involving fraud, waste and mismanagement in any programs funded by or through the Aging Division to the Aging Division immediately upon discovery.

Thank you for helping us combat fraud. Working together on issues such as these makes us a stronger team.



U.S. Department of Health & Human Services

# REPORT FRAUD

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Call the OIG hotline: **800-HHS-TIPS**

Report fraud or misconduct  
relating to the receipt or expenditure  
of HHS contract funds.

4 4 7 - 8 4 7 7

Phone: **1-800-HHS-TIPS**

Fax: **1-800-223-8164**

E-Mail: **HHSTips@oig.hhs.gov**

TTY: **1-800-377-4950**

**Mail:**

Office of Inspector General  
Department of Health & Human Services  
Attn: Hotline  
PO Box 23489  
Washington, DC 20026

For more information, visit the Office of Inspector General online at [oig.hhs.gov/fraud/hotline](http://oig.hhs.gov/fraud/hotline)